

OFFICIAL FILE
ILLINOIS COMMERCE COMMISSION
FORMAL COMPLAINT

Illinois Commerce Commission
527 E. Capitol Avenue
Springfield, Illinois 62701

For Commission Use Only:

Case: 04-0286

ORIGINAL

Regarding a complaint by (Person making the complaint):

Anna & Rose

Against (Utility name):

COMED

As to (Reason for complaint)

we are being charged for electric that we
did not use or should have never been placed in
our name. we dispute \$2700.00 in charges.

in various cities in Illinois.

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is

717 N Willow Elmhurst IL 60126

The service address that I am complaining about is

various

My home telephone is

(630) 359 4008

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at

(630) 359 4008

(Full name of utility company)

Commonwealth Edison Co.

(respondent) is a public utility and is subject

to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

we were sent the book for code section

385, filing for a rate increase not

consumer book. One code in violation

is 83 ~ p2 ~ ADM part. 50(A) 280.70(A) @ least, plus

more.

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

☒ Yes ☐ No

Has your complaint filed with that office been closed?

☒ Yes ☐ No

ILLINOIS
COMMERCE COMMISSION
2004 MAR 18 1 P
CHIEF CLERK'S OFFICE

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

we don't owe 2700.00 of charges.
Com Ed refuses to prove with
any or actual bills for any of the
addresses that they are charging
us for.

Please clearly state what you want the Commission to do in this case: we want copies of all bills,
foreign load tests & actual readings & customer
service records for all addresses & if found to owe
any charges a reasonable payment arrangement

Date: 3 15 04
(Month, day, year)

Complainant's Signature A. K. Jessel

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

VERIFICATION

A notary public must witness the completion of this part of the form.

I, _____, first being duly sworn, say that I have read the above petition and know what it says.
The contents of this petition are true to the best of my knowledge.

(Signature) A. K. Jessel

Subscribed and sworn/affirmed to before me on (month, day, year) march 15 2004

Nancy Hunter
Notary Public, Illinois



NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.